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**Establishing the reach of Cheshire Children's Fund**  
**April 2006 – March 2007**

**Executive Summary**

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**January 2008**

# **Executive Summary**

## **Background**

Cheshire Children's Fund is the local response to the national Children's Fund initiative, which was introduced in 2000, in response to the need for improved services to support children aged 5 to 13 years old who were at risk of being disadvantaged by child poverty and social exclusion. The Children's Fund provides services between Sure Start and Connexions working with all sectors including statutory providers and the voluntary sector. Cheshire Children's Fund aims to develop an early intervention programme that responds to the risks of exclusion and builds family/community capacity by identifying children at risk and providing them and their families with the support they need.

## **Aims of the study**

Monitoring and evaluation is a significant and obligatory element of Children's Fund projects nationwide, with statutory returns made to the Department for Children, Schools and Families. The aim of the additional monitoring work commissioned by Cheshire Children's Fund and carried out by the Centre for Public Health Research was to provide a more detailed picture of the children who had been referred to services, and for what reasons. This was made possible through the development of a system to track individuals and capture routine service data. This report presents an analysis of routine monitoring data collected by 14 service providers over a 12 month period – April 2006 to March 2007. It also draws comparisons with the previous 12 month period (April 2005 – March 2006).

## **Data submission**

An automated system was designed to allow quarterly returns to be made through a secure Web site for information sharing and document collaboration. Each service provider was allocated an account on the system that did not allow access to other service provider sites. However, service providers' sites were configured to allow them to access the Cheshire Children's Fund level, where relevant documents could be retrieved including new spreadsheets. This environment allowed service providers to upload quarterly returns to the Centre for Public Health Research securely.

## **Data analysis**

This was a descriptive study that made use of routinely collected quantitative data in order to establish the number of individuals accessing services during the 12 month period. The master database was interrogated to establish the number of service users accessing each individual service, as well as for Cheshire Children's Fund as a whole. All contacts made during the specified timeframe were exported to Microsoft Excel and examined to establish service user characteristics and levels of service usage. It was also possible to cross reference the findings with those from the previous 12 months to identify trends.

Cheshire County Council provided additional data to establish those children eligible for free school meals by cross referencing to the master database. Such information helps establish the level of work undertaken with children identified as being disadvantaged.

## **Findings**

A total of 1,173 individuals accessed Cheshire Children's Fund services in 2006 – 2007, compared with 1,125 children in 2005 – 2006, a 4.3% increase in the number of referred children. Over the two years, a total of 1,684 children accessed services. Overall, service user characteristics in 2005 – 2006 and 2006 – 2007 remained very similar.

### *Service user characteristics*

- In 2006 – 2007, 56% (662) were males and 44% (511) were females.
- The majority of service users (73%, 858) were aged between 5 and 10 years old.
- The highest number of males (182) and females (122) were seen in the 5–6 year age group.
- 3% (37) were identified as having a disability.
- 4% (41) had a statement of SEN and 14% (105) received support under the SEN code of practice.
- 46% (500) of all service users were entitled to free schools meals (10% of Cheshire school children were entitled to free school meals).

### *Primary reason for referral*

- Challenging behaviour was the most frequently recorded primary reason for referral, accounting for 19% (226) of all referrals in 2006 – 2007.

- 77% (175) of referrals for challenging behaviour were made with males.
- 63% (36) of referrals for poor achievement at school were made with males.
- 57% (50) of referrals for social exclusion/isolation were made with females.

#### *Service activity*

When examining episodes of support (contacts), between April 2006 and March 2007 the 1,173 children received a total of 20,609 episodes of support.

- Over the two year period, despite some fluctuation, both the number of episodes of support and the number of individuals increased. However, overall service users were being slightly more intensely supported in 2006 – 2007 when compared to 2005 – 2006.
- There was an 8.6% increase in the number of episodes of support over the two years.
- The average number of episodes of support increased from 16.9 to 17.6 per person.

#### *Multiple service usage*

- Overall, 47 service users received support from more than one service provider, down from 86 service users in the previous 12 months.
- The majority (57%, 27 children) of multiple service users came from those children who were accessing both services provided by the Lache family support service.
- A one service user was identified as using three CCF services; two of the services were Lache family support services.

### **Conclusions**

A considerable amount of learning has taken place over the past three years of database development and implementation and data analysis. The current study has highlighted the difficulties associated with trying to implement a monitoring system as part of everyday working practice for service providers. However, over the two year period there were improvements in the quality of data returns such that the CCF database has been able to provide a good description of the work undertaken by those service providers who made returns. One of the key improvements was in relation to the primary reason for referral. However, when attempting to establish those who had exited and re-entered the system at a later date, this was made difficult due to a large number of incomplete records. Despite asking for and receiving more comprehensive data returns, date of exit remained a field that service providers did not always

complete. Whilst it took a considerable period of time for some users to embed the process into their practice, such a system is consistent with recent developments to create a child index and the continued emphasis on monitoring and evaluation in children's services.

The introduction of electronic returns and development of a Cheshire Children's Fund database has provided some insight into the issues that would need addressing if such a project were to be undertaken in the future to encompass all service providers. Such issues include ensuring all parties involved have the appropriate equipment. Training of service providers to ensure familiarity with the system implemented and the appropriate consent is obtained from potential service users in line with the Data Protection Act. Without such procedures in place the ability to obtain a complete data set in order to help inform service development can be problematic.

The database has identified that over the course of the two years of electronic data returns males continued to be the principal services users. Challenging behaviour remained the most frequently recorded primary reason for referral, particularly for males. Females were more likely to be referred for social exclusion/isolation and confidence/self-esteem. This suggests that young boys and girls are likely to respond differently to stresses in their lives and express their unhappiness or difficulties in different ways. Some very young children were being supported by some projects, indicating that some CCF projects were focused on providing early intervention to address difficulties, in line with the key objectives of the Fund.

Overall, Cheshire Children's Fund was meeting its objectives in terms of working with children between the ages of 5 to 13 years old in some of the most disadvantaged areas of Cheshire. However, projects that were focused on supporting young carers were in contact with children from across Cheshire, not just from areas of socioeconomic deprivation. Some children were very intensively supported, indicative of the deep seated nature of their needs in many cases.